REFERENCES AND REVIEWS

(Continued on Page 33)

irradiation is the preferred form of therapy, either alone or in combination with surgery. When last seen 60 per cent of patients were apparently cured. Multiple courses of irradiation, repeated surgery, or a combination of both were required for 45 per cent.

DETECTION OF COXSACKIE VIRUS ANTIGEN IN URINARY CELLS BY IMMUNOFLUORESCENCE—Y. Hinuma, T. Miyamoto, Y. Murai, and N. Ishida. Lancet, 2:179 (July 28) 1962.

The complement method of fluorescent antibody technique revealed Coxsackie B-5 virus antigen in exfoliated cells in the urine of 6 to 12 patients with aseptic meningitis. The diagnosis of Coxsackie B-5 virus infection was confirmed in four of the six patients, by virus isolation or by demonstration of specific antibody rise, or both. Detection of virus antigen in urinary cells by the immunofluorescence may aid in rapid specific diagnosis of the virus infection.

A NOVEL TEST FOR PREGNANCY—R. X. Sands, J. Mayron, and A. V. Pinski. New York J. Med., 62:2494 (Aug. 1) 1962.

In the experiments described the withdrawal bleeding which follows the combined use of anhydrohydroxyprogesterone, a progestational agent, and ethinyl estradiol, an estrogen (Pro-Duosterone [PD]) was used in testing for the presence of early pregnancy. The procedure is referrred to as the PD pregnancy test. Of 122 women in whom the PD and the AZ (Aschheim-Zondek) tests (Frank-Berman modification) were performed, 66 were found to be pregnant and 56 nonpregnant. Among the 66 pregnant nine false results were obtained with the AZ test and one with the PD test,

an accuracy of 98.4 per cent with the latter. In the non-pregnant group four incorrect results were obtained with the PD test and one with the AZ test. No significant side effects occurred in this group or in an additional series of 100 cases, all known to be pregnant. In the largest number of cases a negative result becomes available within three days after the last dose of the estrogen-progesterone combination.

RESPONSE OF INFANTS TO PERTUSSIS VACCINE AT ONE WEEK AND TO POLIOMYELITIS, DIPHTHERIA, AND TETANUS VACCINE AT SIX MONTHS—N. R. Butler, B. D. R. Wilson, P. F. Benson, J. A. Dudgeon, J. Ungar, and A. J. Beale. Lancet, 2:112 (July 21) 1962.

Infants were given pertussis vaccine either plain or adsorbed onto aluminum phosphate in the first week of life. The agglutinin response was superior with the absorbed vaccine. The two vaccines gave equally good protection against whooping cough in a follow-up study. The paper contains a misprint, for among controls there were 14 cases (not 24 as stated) among 24 home exposures. Children given polio, diphtheria, and tetanus vaccine starting at six months made a satisfactory response to all the components. This schedule is immunologically sound but has the drawback of employing two courses of vaccination.

OPEN DOOR—TEN YEARS' EXPERIENCE IN DINGLETON—R. A. W. Ratcliff. Lancet, 2:188 (July 28) 1962.

Statistics of Dingleton, the only mental hospital in Scotland functioning entirely without locked wards, are compared with those relating to Scottish mental hospitals in general. Quantitative assessment is attempted of (1) risks to the patient (death by suicide and accident), (2) possible embarrassment to the community (escapes and police

